PART B - FEE(S) TRANSMITTAL

APR 1 9 2015	hpiete and end this form, together with oplicable fee(s), to: Mail or Fax					Mail Stop ISSU TEE Commissioner to Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
appropriate. All further coindicated wifes corrected	rm should be used for trans respondence including the I below or directed otherwise	smitting the ISSU Patent, advance of in Block 1, by (a	IE EEE and PI	IBL ICA	TION FEE (if requ	ired). Blocks vill be mailed ; and/or (b) in	1 through 5 s to the current dicating a sep	should be comp correspondence arate "FEE ADI	leted where address as DRESS" for
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 207 7590 02/14/2005					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
WEINGARTEN, LLP TEN POST OFFIC BOSTON, MA 02		NEBIN & LE	BOVICI	I S a tr	Cen hereby certify that the states Postal Service of ddressed to the Mai ransmitted to the USP	nis Fee(s) Tran with sufficient 1 Stop ISSUE	niling or Tran esmittal is bein postage for fir FEE address 4000, on the	ig deposited with st class mail in above, or bein	h the United an envelope ag facsimile clow.
4/19/2005 MBELETE2 00					Constance (Clark Ga	gnebin	(De	positor's name)
)1 FC:1501	1400.00 OP				Constance Clouk ga		- gagn	bu	(Signature)
)2 FC:1504)3 FC:8001	300.00 OP 30.00 OP			L	April 12, 2005			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT		OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
	ATALYST FOR THE SELE		·····					DATE	NIE I
APPLN. TYPE	SMALL ENTITY.		SUE FEE I		BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	nonprovisional NO		0	\$300		\$1700		05/16/2	005
EXAMINER		ART UNIT		CLA	SS-SUBCLASS]			
LANGEL, WAYNE A		1754		:	502-325000				
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print as target)								
PLEASE NOTE: Unless	RESIDENCE DATA TO B an assignee is identified be a 37 CFR 3.11. Completion of	low no assignee	data will annea	r on the	natent. If an assign	nee is identifie	ed below, the	document has be	een filed for
(A) NAME OF ASSIGN	EE	(H	B) RESIDENCE	: (CITY	and STATE OR CO	UNTRY)			
JACOBS NEDER	LAND B.V.		Leiden	, Ne	therlands				
	e assignee category or catego		inted on the pate	`	☐ Individual C	orporation or o	other private gr	oup entity 🔲	Government
4a. The following fee(s) are Issue Fee	enciosed:	41		` /	ount of the fee(s) is en	iclosed.			
Publication Fee (No s	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies10			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-0804 (enclose an extra copy of this form).						
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.	☐ b. Applican	nt is no l	onger claiming SMA	LL ENTITY s	tatus. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the received the second sec	is requested to apply the Issu sublication Fee (if required) ords of the United States Park	Eee and Publica of be accepte an and Trademark	tion Fee (if any) d from anyone o Office.	or to rether that	e-apply any previous in the applicant; a reg	ly paid issue fe istered attorne	ee to the applic y or agent; or t	ation identified a the assignee or o	above. ther party in
Authorized Signature	_[hst] li	yl _			Date	4-1	2-5	<u>-</u>	
Typed or printed name _		nebin III			Registration		.467		•
This collection of informatian application. Confidential submitting the completed at this form and/or suggestion: Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPTs for reducing this burden, shinia 22313-1450. DO NOT 1.1450.	11. The information 122 and 37 CFR O. Time will vary ould be sent to the SEND FEES OR	on is required to 1.14. This colled depending upon e Chief Informa COMPLETED F	obtain of the introduction of the introduction of the contract	or retain a benefit by estimated to take 12 dividual case. Any c ficer, U.S. Patent and TO THIS ADDRES	the public whi minutes to cor omments on the Trademark O S. SEND TO:	ch is to file (ar nplete, includi ne amount of t ffice, U.S. Dep Commissioner	nd by the USPTC ng gathering, pr ime you require partment of Com- for Patents, P.C	to process) eparing, and to complete imerce, P.O.). Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.